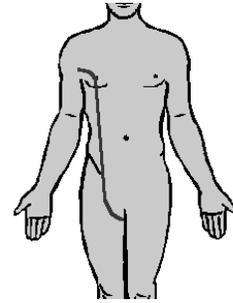


DISEASES OF THE BREAST

Development of the Breast

In the mother's womb breast tissue develops in a line called the "milk line" which extends from under the armpit to the inner side of the upper thigh.

Different areas develop to form the breast in different species.



VARIATIONS FROM THE NORMAL AROUND

The commonest amongst these is the presence of a large amount of breast tissue in the underarm (called axilla) and the presence of small rudimentary extra nipples in the line of the milk-duct. Axillary breast sometimes can be quite large and warrant treatment due to its size.

DISEASES OF THE BREAST

PAINFUL BREAST CONDITIONS

- Milk engorgement during lactation
- Infection usually bacterial
- Inflammation often sterile.

NON-PAINFUL BREAST CONDITIONS

- Bloody discharge from the nipple
- Innocent lumps
- Not-so-innocent lumps
- Ulcers of the nipple

Milk Engorgement

Caused by---- inadequate drainage of milk during breast feeding.

Causing-----a painful nodular breast, often with mild fever.

Needing-----local heat and either manual expression of the breast or the use of breast pumps.

Infection-breast abscess

Caused usually by---- deferred weaning of a baby who has developed teeth. Bites of the nipple small infected ulcers spread of infection into the breast along the milk ducts.

Presents with----an extremely painful and reddish swelling of the breast and fever.

Treated by--- antibiotics and if small, repeated aspirations or if large by an operation to drain the pus out.

Inflammation of the Breast

The cause is often not well defined. The symptoms are often related to periods. In some, a background of stress is often forthcoming.

Presents with----

- Pain and heaviness usually during menstruation but may be constant.
- Tender nodules in the breasts.
- Discharge from the breasts which may be watery, milky, like pus, greenish or even bloody.

Given this scenario the following is usually done —

- Carrying out a detailed history taking(including family history) and examination.
- Running some blood tests which may ask for hormonal profiles.
- Carrying out some X-rays { MAMMOGRAMS} or Ultrasound tests {SONOMAMMOGRAMS} or even MRIs of the breast where medically indicated.

Treatment will be by.

- Reassurance- as often dependant on mental strain.
- Medicines like Vitamin E and Primrose oil.
- Hormonal medications.
- Often the judicious use of Surgery.
- CONDITION- is often self-limiting and usually not dangerous.

Bleeding from the Nipple

May be due to-

- Inflammation when it is associated with pain.
- Innocent-feathery tumours called papillomas.
- Not so innocent-the papillary cancers.

TREATMENT:-

- Treatment of underlying inflammation where bleeding usually occurs from multiple channels.
- The culpable channel when single, is removed and subjected biopsy.
- If papilloma no further treatment needed, if cancer wider surgery.

Innocent lumps

- Can occur either during youth or mid-age.
- The lumps are freely mobile within the breast and is therefore also called a “breast mouse”
- May be multiple.
- Simple removal usually suffices.
- Larger lumps sometimes can be a “phyllodes tumour” – these have a tendency to recur and if large may even require a mastectomy(10% metastsize)

Not so innocent lumps

Though only a part of whole spectrum of breast diseases, BREAST CANCER has been the subject of intense research and literature because of its devastating nature.

Some present-day statistics

Statistics reveal:

- Every three minutes a woman is diagnosed with breast cancer.
- Every thirteen minute a woman dies from breast cancer
- It accounts for 20% of the total cancer-related diseases in India and is largely prevalent among urban women. Presently, 75,000 new cases occur in Indian women every year.
- Over the course of a lifetime, one in twenty two women will be diagnosed with breast cancer.

Like any dreaded disease, BREAST CANCER is also subject to various myths

(Refer to the presentation - "**An Ode to Womanhood**").

Not so innocent lumps often present with:-

- A firm to hard lump which WILL JUST NOT GO AWAY.
- Also a dimpling of the skin.
- A nipple which suddenly seems drawn in.
- A skin which looks like an orange peel.
- Bloody discharge .
- Sometimes with an angry painful lump in the young.
- A non-healing "eczema" of the nipple.

STEPS THAT WILL BE CARRIED OUT BY YOUR DOCTOR

- Your doctor will complete history-taking and carry out a complete clinical examination.
- May also choose to do a mammogram in some instances.
- Carry out an FNAC or Core Biopsy to CONFIRM the diagnosis.
- Stage the disease by a Chest X-ray and an Ultrasound Scan of the Abdomen.
- May even carry out "Whole body bone scan".

OPTIONS OF TREATMENT ARE:-

- Surgery either partial or total {often needing Frozen Section}.
- Hormonal medicines.
- Radiation.
- Chemotherapeutic medicines.
- THESE ARE OFTEN USED IN VARIOUS COMBINATIONS DEPENDING ON THE TYPE, STAGE AND GRADE OF TUMOUR

Factors responsible for an Increase Incidence of Breast Cancer

- Geographical distribution: - Highest in Hawaii and lowest in Japan
- Genetic factors:-
 - 3 times increase if the patient's relative has pre-menopausal ca.
 - 2-3 fold increase in risk amongst first degree relatives of a patient with breast cancer.
 - 5 times increase if the patient's relative has bilateral breast ca.
- Reproductive history:-
 - Ladies who have had a full term pregnancy before the age of 20 and ladies with many children are less prone to develop cancer.
- Diet:-
 - High fat diet, particularly intake before adulthood associated with high incidence of breast cancer.
- Radiation:-
 - Exposure before the age of 30 may be responsible for a high incidence of breast cancer.

So what can be done?

- Breast self examination. See "Ode to womanhood" . **NOTE;- Males are also prone to breast cancer albeit at a far lower incidence.**
- Screening by mammography at intervals after a certain age.
- Fight against weight gain.
- Get yourself thoroughly checked if YOU are worried.

JUST REMEMBER---- YOU ARE NOT WASTING ANYBODY'S TIME!!